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REQUEST FOR EXTENSION OF, AND ADDITIONAL RESOURCES FOR, THE UNFPA COUNTRY PROGRAMME FOR BOLIVIA

Report of the Executive Director

I. BACKGROUND

1. UNFPA requests that the programme of assistance for Bolivia be extended by one year until the end of 1996, in order to harmonize the programming cycle with that of UNDP. The Fund also requests that the approval authority be increased by $2 million to cover the additional year. The programme would thus total $12 million for the period 1991-1996, $11 million of which would be programmed from UNFPA's regular resources.

2. In June 1991, the Governing Council approved the first UNFPA country programme for Bolivia, a UNFPA priority country, in the amount of $10 million, $5.5 million of which was to be provided from UNFPA regular resources over a five-year period (1991-1995). Of the $4.5 million that was sought from multi-bilateral sources, a total of $700,000 was obtained from the Government of Sweden and a private German organization. Given that Bolivia is a UNFPA priority country and that the bulk of resources were needed in the core priority area of reproductive health, UNFPA opted to fund the remaining amount from its regular resources. Approximately $8.5 million of the total programme amount will be expended by the end of 1995. Of the proposed additional $2 million, $1.7 million would be programmed from UNFPA regular resources and $300,000 would be sought from other sources.

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3. The increased funding authority is needed to consolidate the programme's achievements to date, i.e., ensure continuity of the National Health Secretariat's drive to decrease maternal mortality and morbidity and the National Education Secretariat's commitment to incorporate population education into its education reform programmes; and support development of adolescent reproductive health-related activities. A programme review and strategy development (PRSD) exercise will be carried out to prepare a new programme of assistance starting in 1997 in close coordination with other donors, especially the other organizations of the Joint Consultative Group on Policy (JCGP).

4. The programme extension has been prepared in the framework of the Country Strategy Note and reflects the Government's priorities. The extension takes into consideration the results of the country programme evaluation of 1995. That evaluation found UNFPA assistance had helped increase understanding and application of the concept of reproductive health, including greater coverage by reproductive health services; promoted awareness and discussion of population issues; and increased the availability of reliable population and health data. These results were obtained mainly by effective support for the National Health and Education Secretariats and the National Institute of Statistics. The 1995 evaluation recommended that UNFPA consolidate achievements in the areas of reproductive health and information, education and communication (IEC), concentrating mainly on support to the National Health and National Education Secretariats. The evaluation also recommended strengthening programme monitoring.

5. The proposed programme activities take into consideration the Programme of Action of the International Conference on Population and Development (ICPD). While the programme originally accommodated funds for five sectors and a programme reserve, this request is presented according to the new UNFPA emphasis on three core areas: reproductive health, including family planning and sexual health (hereafter referred to as reproductive health); population and development strategies; and advocacy. Special attention would be given in all three areas to the development of national capacity and to the sustainability of programme activities.

II. STATUS OF PROGRAMME IMPLEMENTATION

6. Based on priorities identified by the Government and the recommendations of the 1990 PRSD mission, the first UNFPA programme identified five sectors for support. Of these, major activities have been implemented under three: maternal and child health and family planning (MCH/FP); IEC; and data collection and analysis. No activities were undertaken in the area of population policy formulation, and only limited activities were undertaken in the area of population dynamics. Activities in the area of women, population and development were approved only in mid-1995.

Reproductive health

7. The first programme had the following sectoral aims in the area of reproductive health: (a) extend coverage of MCH/FP services, focusing on selected target groups, (b) improve the quality of these services, (c) strengthen institutional, operational and managerial capacity at the local level; and (d) increase understanding of sexual and reproductive behaviour through education, addressing such issues as reproductive health, family life education and HIV/AIDS.

8. UNFPA's assistance in this area has focused largely on supporting the reproductive health approach being applied by the National Health Secretariat and on the reproductive health services that it is offering. UNFPA assistance also contributed to the preparation of the national plan for accelerated reduction of maternal, perinatal and child mortality; an increase in the coverage of services provided for prenatal care, deliveries and family planning; the training of health personnel in reproductive health; and the strengthening of reproductive health contents in the curricula of medical and nursing schools.

9. Under the proposed extension, UNFPA's support would be provided to help the National Health Secretariat continue to improve reproductive health services and to extend current coverage of those services, with special attention being given to: (a) advocacy in favour of reproductive health at the central and municipal levels, including further decentralization of activities to the municipal level; (b) strengthening reproductive health-related IEC activities with the assistance of the Country Support Team (CST) based in Santiago, Chile; (c) making the programme more responsive to the country's sociocultural diversity and increasing community participation in service delivery; (d) further developing training activities and appropriate mechanisms to evaluate the results and impact of programme activities and to supervise work performance. Moreover, with UNFPA's assistance, the National Health Secretariat would develop selected pilot activities related to reproductive health services for adolescents.

10. UNFPA would also continue to support other selected activities in reproductive health, including an adolescents' sex education project. Implementation would be closely coordinated with the technical participation of the National Health Secretariat. Further technical support in the area of IEC would be provided by the National Education Secretariat. All UNFPA assistance would be provided in the context and in accordance with the ongoing changes in the health sector, especially the decentralization process and the promotion of community participation.

11. A total funding authority of $6.8 million would be needed for 1991-1996 for reproductive health, an increase of $2.7 million in the original amount approved by the Governing Council. Of this amount, the aim would be to mobilize $300,000 from multi-bilateral resources. Under the programme approved by the Governing Council, the area of MCH/FP received 41 per cent of the

total spending authority. With this extension, the area of reproductive health would receive 57 per cent of the total spending authority of the programme.

Population and development strategies

12. Owing to institutional changes in the Government, UNFPA has provided only limited support for the formulation of a comprehensive population policy under the current programme, even though it was a long-term aim of the programme. However, population concerns have been advocated at the policy-making level within the new Government. Government interest in population and reproductive health issues as well as in women's empowerment is reflected in the national Declaration of Principles on Population and Sustainable Development endorsed by the President of Bolivia for the ICPD.

13. The Government has expressed interest in strengthening the incorporation of population concerns in the different development programmes and in restructuring the coordination mechanisms for population programmes. In 1996, UNFPA would provide technical assistance to the Government in this area as part of the PRSD exercise, through the CST and through the assistance provided by programme support staff. The latter would also assist in developing national mechanisms to follow up and monitor implementation of ICPD recommendations, as well as those of the Fourth World Conference on Women and the World Summit for Social Development.

14. UNFPA's support in the area of data collection and analysis and population dynamics has been concentrated mainly on the 1992 population census, as well as the subsequent analysis of census data. This analysis would continue under the programme extension. UNFPA also contributed to the national demographic and health survey. With UNFPA's assistance, the population census provided socio-demographic information that has been used by the Government for the implementation of its new policies. Results obtained from the national demographic and health survey have allowed the comparison of health indicators with the results of 1989. For the first time, the survey included a module on maternal mortality and HIV/AIDS.

15. UNFPA would also continue supporting the improvement of the civil registration system for the inclusion of undocumented sectors of the population in order to help rural and urban marginal populations, especially women, benefit from the decentralization currently being promoted through government reforms and programmes.

16. UNFPA's support for a national youth survey to be undertaken by the National Secretariat of Ethnic, Gender and Generational Affairs would concentrate on reproductive health concerns. Given the Fund's limited financial resources, UNFPA would also seek participation by other donors as well as the collaboration of related national institutions. The survey would provide important baseline information for the development of adolescent services programmes, an area that is gaining increasing attention among different government institutions and non-governmental organizations (NGOs).

17. The total amount needed for the area of population and development strategies for 1991-1996 is $2.7 million, $400,000 less than the amount originally approved for data collection and analysis and population policy formulation when the programme was first approved. Of the total, $700,000 would come from multi-bilateral sources, $800,000 less than what was originally envisaged. It would include funding for one programme support staff.

Advocacy

18. The programme approved by the Governing Council included an important advocacy component aiming at increasing the understanding of the relevance of population changes through an overall IEC strategy. The programme also aimed to: (a) assist the national authorities in incorporating population contents in the design of the curriculum for primary education in connection with educational reforms; (b) incorporate population topics in the national literacy campaign; (c) establish a network of population documentation centres; and (d) design and implement population education programmes addressing cultural features and behaviours of the different ethnic groups in Bolivia.

19. UNFPA's support for IEC activities has contributed to an increased awareness and understanding of the importance of population issues at all levels. UNFPA's assistance has concentrated mainly on the National Education Secretariat, which has started to incorporate population issues in its programme of education reform. Activities have benefited teachers from the formal and non-formal sectors and journalists from the mass media; assisted in incorporating population education in the curricula; helped establish a documentation centre; and contributed to the design and implementation of programmes addressing cultural differences. Programme goals in relation to the national literacy campaign are no longer relevant since the campaign has been discontinued by the Government.

20. In 1996, UNFPA would continue its support for the National Education Secretariat's efforts to incorporate population education in primary-level curricula and school texts, training of facilitators and pedagogic advisers responsible for implementing education reform, and the inclusion of population education in teacher training institutions.

21. In the area of non-formal education, with UNFPA's support, the National Secretariat of Education would continue training non-formal instructors and communicators (including NGOs and grassroots organizations, community leaders, health personnel, rural promoters and social communicators) and the preparation and production of related materials and radio programmes. Activities in the National Education Secretariat would have an important role in providing technical support to other aspects of the programme as well, especially reproductive health activities with IEC components. The Secretariat would have a coordinating role in this area to ensure complementarity of activities.

22. In 1996, UNFPA would promote and support population advocacy efforts by different national institutions, especially those of the national counterparts of UNFPA-supported activities.

This would be done with the help of the CST, programme support staff and the UNFPA-supported IEC project in the National Education Secretariat. Transfer of technical capacity to the national counterparts in this area would ensure sustainability of the activities.

23. Moreover, UNFPA would continue providing support to the National Secretariat of Ethnic, Gender and Generational Affairs for the promotion of women's empowerment and women's reproductive rights, as well as to indigenous organizations for women's reproductive health education while ensuring appropriate project coordination mechanisms with the National Education and Health Secretariats.

24. A total funding authority of $2.5 million from UNFPA regular resources would be needed in the area of advocacy, including funding for one programme support staff.

Programme coordination and monitoring and evaluation

25. UNFPA assistance is being coordinated by the Directorate of International Cooperation and Funding of the Ministry of Finance. The National Health and Education Secretariats would ensure technical coordination and complementarity of all programme activities related to reproductive health and IEC.

Financial summary

26. As indicated in paragraph 1, UNFPA proposes to extend the Bolivia country programme through 1996 and to increase the funding approval authority by $2 million. The programme would thus total $12 million for the period of 1991-1996, of which $11 million would be programmed from UNFPA regular resources and $1 million from a combination of UNFPA regular resources and multi-bilateral resources, when and to the extent such additional resources become available. The following table shows how that amount would be accommodated by programme area.

Sector as approved by Governing Council	Resource distribution as approved by the Governing Council 1991		New sectors	Resource distribution in new sectors	Proposed increased funding approval authority for 1996		Total
					Regular resources	Other re sources	
	Regular resources ($)	Other resources ($)		($)	($)	($)	($)
MCH/FP	2,500,000	1,600,000	Reproductive health	4,100,000	2,400,000	300,000	6,800,000
IEC	700,000	900,000	Advocacy	2,600,000	(100,000)	-	2,500,000
Women, population & development	500,000	500,000					
Population policy formulation	600,000	600,000	Population & development strategies	3,100,000	400,000	(800,000)	2,700,000
Data collection and analysis	1,000,000	900,000					
Programme reserve	200,000	-		200,000	(200,000)	-	-
Total	5,500,000	4,500,000		10,000,000	2,500,000	(500,000)	12,000,000

III. RECOMMENDATION

27. The Executive Director recommends that the Executive Board approve the extension of the Bolivia country programme by one year and its increased funding authority by $2 million as detailed in the above table, subject to the availability of resources, and authorize the Executive Director to make the necessary arrangements for its management, funding and execution.

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REQUEST FOR EXTENSION OF, AND ADDITIONAL RESOURCES FOR, THE UNFPA COUNTRY PROGRAMME FOR CUBA

Report of the Executive Director

I BACKGROUND

1. As a result of the length of time needed to implement programme activities, the fourth comprehensive population programme for Cuba, originally approved for five years, 1990-1994, was extended by one year until the end of 1995. By the end of 1995, $700,000 more than the originally approved amount of $4 million had been spent on the programme.

2. UNFPA recommends and requests that the fourth comprehensive population programme for Cuba be extended for one more year, until the end of 1996, in order to harmonize the programme cycle with those of UNDP and UNICEF. The Fund requests an additional amount of $2.2 million, as detailed below, to carry out programme activities during 1996. The funding authority for the programme (1990-1996) would thus total $6.9 million, all from UNFPA regular resources.

3. The request for the extension and additional programme funds is presented according to UNFPA's new programme priority areas: (a) reproductive health, including family planning and sexual health (hereafter referred to as reproductive health); (b) population and development strategies; and (c) advocacy. There would also be funding for an additional sector called "multisectoral activities". The proposed programme strategies for 1996 take into consideration the

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Programme of Action of the ICPD, which is fully endorsed by the Government of Cuba. The strategies are also in accordance with the recommendations made by the programme review mission that was carried out in May 1995. The programme extension is planned to lead into the fifth country programme (1997-2001). The proposed programme will be presented to the Executive Board in early 1997.

4. The increased funding authority is essential to achieve the following three objectives: (a) to reduce the incidence of unwanted pregnancies and pregnancy interruptions; (b) to improve socio-demographic data collection, analysis and use; and (c) to increase and improve information, education and communication (IEC) activities targeted at youth and focusing on sexual and reproductive health and family planning. The primary focus of the programme extension will be on reducing the high rate of adolescent pregnancies and the associated high incidence of abortion. The programme review mission concluded that these areas had not been adequately tackled during the period of programme implementation to date because of a lack of adequate reproductive health information and counselling services and the lack of population development planning due to weak information systems.

5. Cuba has good demographic, health and educational indicators for a developing country. However, these indicators have been worsening as a result of an acute economic crisis, stemming from the abrupt rupture of Cuba's link with its former trading partners. This has been aggravated by a tightening of the trade embargo by the United States. For example, the maternal mortality rate has shown a negative trend: in 1994 it rose to levels not seen since the beginning of the 1980s (44.1 per 100,000 live births). Likewise, the infant mortality rate in 1994 (9.9 per 1,000 live births) was higher than in 1993 (9.4 per 1,000). Also, the incidence of sexually transmitted diseases (STDs) and pregnancy interruptions (abortion and menstrual regulation) has increased because of the shortage of contraceptive supplies, due to the Government's lack of hard currency.

II. STATUS OF PROGRAMME IMPLEMENTATION

6. The programme review concluded that the objectives of the fourth country programme have not been achieved, because of: (a) the acute economic crisis; (b) delays in programme implementation; (c) lack of programme focus and weak coordination among projects; (d) deterioration of primary and secondary health care systems; (e) scarcity of contraceptives; (f) the increase in the number of pregnancy interruptions; (g) weak IEC in the health sector; and (h) low levels of participation by adolescents in IEC activities. The extension of the programme with increased funding will provide the opportunity to reach some of the original goals. The programme funds originally approved in 1989 have proven to be insufficient in light of the shortage of contraceptives and the deterioration in the primary health care system, neither of which were foreseen when the programme was first proposed.

Reproductive health

7. In accordance with the ICPD Programme of Action, steps have been initiated to reorient the maternal and child health and family planning (MCH/FP) programme towards that of a reproductive health programme, which would include *inter alia* dealing with counseling and service delivery for family planning, the prevention of STDs and the promotion of sexual health.

8. The programme's sectoral objective has been to decrease the number of unwanted pregnancies through the provision of MCH/FP services that were targeted at high-risk groups. Although the objective has not been fully accomplished, there have been several noteworthy achievements. Forty reproductive health referral centres for family doctors and nurses have been established. Reproductive health services are now available to almost all women of reproductive age. The capacity for providing reproductive health services has been increased by training 600 family doctors and nurses to serve as trainers for their colleagues so that their skills can be passed on. Service-delivery structures have been reorganized to provide better reproductive health care for high-risk women. The programme has promoted greater knowledge of contraception among adolescents. Progress has been made in the construction of an oral contraceptive production plant. Research studies have been carried out on the sociocultural determinants of abortion, sexual behaviour, the knowledge and use of family planning methods and on the prevention of STDs and HIV/AIDS.

9. Several constraints have impeded achieving these sectoral objectives. The most critical has been the shortage of contraceptives, resulting in a decline in the number of users and the corresponding increase in unwanted pregnancies, and pregnancy interruptions. Primary- and secondary-level health care has deteriorated because of the reduction of national resources for health and the lack of medical supplies. In addition, IEC activities have been inadequate, as have reproductive health counselling services, especially for adolescents.

10. The increased funding authority of $1.2 million in 1996 would be used to: (a) complete the oral contraceptive production plant; (b) diversify the provision of contraceptives to meet existing demand; (c) provide adequate reproductive health services and counselling for adolescents; (d) reinforce reproductive health IEC activities in primary health care services; (e) strengthen the reproductive health referral centres; and (f) promote male responsibility in the area of reproductive health. With the completion of the oral contraceptive plant, Cuba will become self-sufficient in oral contraceptives. The programme extension would help the Government prepare for the implementation of a comprehensive reproductive health programme starting in 1997.

Population and development strategies

11. There have been two main sectoral objectives in the area of population and development strategies. The first was to establish a national integrated information system disaggregated by

subregion and gender and to incorporate such data into development programmes so that they respond to local needs. The second was to achieve an improved population distribution, taking into account regional socio-economic development, by proposing recommendations for regional population distribution policies. Activities designed to achieve these sectoral objectives have only recently been initiated.

12. Achievements to date have been to: (a) prepare an integrated statistical system, (b) carry out statistical analysis with a gender perspective; (c) conduct research studies on the structure and dynamics of human settlements; (d) increase capacity to carry out population surveys; and (e) develop and improve various national information systems and centres. All of these achievements have been constrained by the lack of updated socio-economic information, much of which dates from 1989 or earlier. No population census was carried out in the 1990s because of the lack of national resources. The kind of data needed by users have not been generated because of weak coordination between data producers and users. Statistical information has been generated and analysed without a gender perspective.

13. Additional funds estimated at $400,000 are required for 1996 in order to continue to strengthen the national capacity to carry out socio-demographic analysis for development planning as well as to make that information current by updating the sample framework and by conducting surveys and research studies. This will be achieved by promoting greater intersectoral distribution of statistical information and research results by improving the coordination of the organizations involved, such as the Ministry of Public Health's Statistical Department, the National Statistics Institute and the Physical Planning Institute, and by defining more clearly the relationship between users and producers of statistical information. Other goals include promoting new research focusing on the impact of the economic crisis on socio-demographic variables, emphasizing the relationship between different productive sectors and migration, and incorporating gender concerns into spatial distribution research studies.

Advocacy

14. The sectoral objective in the area of advocacy has been to improve IEC activities directed to men and women to enhance their ability to regulate fertility in a responsible way, focusing attention on high-risk groups. The principle achievements have been the development of sex education training for trainers and the provision of such education to students and the design, validation and dissemination of messages on safe sexual behaviour and responsible parenthood through such informal channels as television and radio.

15. The constraints the programme has faced included the lack of coordination between IEC activities and the health sector, which has caused a discrepancy between the reproductive health services and contraceptives offered versus those that were being requested. The mass media messages

that were developed were of low quality, and they were not broadcast by the main mass communication channel. In addition, the country's decision makers gave a low priority to reproductive health issues, specifically the lack of contraceptive availability.

16. An additional budget of $500,000 is required for 1996 to increase and improve IEC activities in the area of reproductive health targeted especially at adolescents. The following seven strategies would be carried out: (a) improving coordination between the health and IEC sectors to maintain a balance between the reproductive health services and contraceptives offered and those demanded; (b) focusing IEC and advocacy activities on promoting the reproductive and sexual health of adolescents; (c) strengthening IEC components in public health programmes by training health educators in counselling on reproductive health; (d) improving IEC messages and channels by providing coordination and by promoting more attractive messages; (e) strengthening the population education programme, covering all educational levels and teacher's schools, taking advantage of the universal nature of formal education in Cuba; (f) initiating campaigns to sensitize high-level government personnel and decision makers on population issues; and (g) incorporating advocacy components in all activities, targeting high-level government personnel and Parliamentarians.

Multisectoral activities

17. The programme reserve approved under the fourth country programme was used to carry out multisectoral activities, such as formulating projects, identifying programme strategies, reviewing and evaluating the programme and carrying out IEC activities. Additional funds of $100,000 are requested to identify new programme strategies, develop a new programme for the period 1997-2000, assist in the formulation of new projects and strengthen the management of the programme.

Programme coordination and monitoring and evaluation

18. The programme would be coordinated and monitored by the International Economics Direction of the Ministry of Foreign Investment and Economic Collaboration (MINVEC) and UNFPA's Cuba field office. UNFPA activities would be monitored and evaluated according to standard UNFPA guidelines.

Financial summary

19. UNFPA proposes to extend the Cuba country programme through 1996 and to increase the funding approval authority for the programme by $2.2 million from UNFPA regular resources. The following table shows how the additional funds would be accommodated by programme area.

Sector as approved by Governing Council	Resource distribution as approved by the Governing Council 1989 ($)	New sectors	Resource distribution in new sectors ($)	Total expenditures (1990-1995) ($)	Proposed increased funding approval authority for 1996 ($)	Total ($)
MCH/FP	2,000,000	Reproductive health	2,000,000	3,400,000	1,200,000	4,600,000
IEC	1,000,000	Advocacy	1,000,000	400,000	500,000	900,000
Population policy formulation	500,000	Population & development strategies	900,000	800,000	400,000	1,200,000
Data collection and analysis	400,000					
Programme reserve	100,000	Multisectoral activities	100,000	100,000	100,000	200,000
Total	4,000,000		4,000,000	4,700,000	2,200,000	6,900,000

III. RECOMMENDATION

20. The Executive Director recommends that the Executive Board approve the extension of the Cuba country programme through 1996 and that it approve an additional funding of $2.2 million, as detailed in the attached table, subject to the availability of resources, and authorize the Executive Director to make the necessary arrangements for its management, funding and execution.

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EFFECTIVENESS OF UNFPA'S PUBLICATIONS PROGRAMME

Report of the Executive Director

BACKGROUND

1. This report is being submitted to the Executive Board in response to decision 95/35, paragraph 8, which requested the Executive Director to present to the Board at its second regular session of 1996 a detailed report on the effectiveness of the UNFPA publications programme, in accordance with paragraph 31 of the report of the Advisory Committee on Administrative and Budgetary Questions, and taking into account the need for publications to be available in a range of languages.

2. It should be recalled that the Governing Council, at its thirty-eighth session in June 1991, agreed to the rationale set forth by the Executive Director in document DP/1991/37 concerning the funding of UNFPA publications (decision 91/36, para. 12) as follows: (a) publications that are designed to promote greater awareness and understanding of activities of UNFPA *per se* should be financed from the APSS budget; (b) publications that are designed to promote dialogue and exchange on the wider issues of population and development themselves should be financed from the programme budget.

3. Since the preparation of the previous publications report in 1991, the Fund's publications have increased both in number and in range, in response to UNFPA's enhanced advocacy role in

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connection with the International Conference on Population and Development (ICPD) and to increased demand from governments, population professionals, colleagues in the United Nations system, and non-governmental organizations (NGOs) seeking to operationalize the ICPD Programme of Action in their own development plans. UNFPA is also now more active in donor countries in its advocacy efforts to develop a stronger constituency for population and development activities and to meet the ICPD goal that one-third of population resources should come from industrialized countries.

4. This report reviews the UNFPA publications programme in light of the ICPD and the Fund's enhanced role in advocacy. It is presented in four sections. The first section reviews the policy development of UNFPA's publications programme, highlighting the legislative authority for the Fund's public information and awareness creation activities. The second section presents the findings of an independent analysis of UNFPA publications. The third section examines the cost-management of the UNFPA publications programme, including the use of the latest technology to produce and disseminate UNFPA publications and public information. The report concludes with a recommendation for the consideration of the Board. This report should be read in conjunction with the Fund's biennial budget estimates for administrative and programme support services for the 1996-1997 biennium (document DP/1995/42), which was adopted by the Board at its third regular session in 1995.

I. POLICY DEVELOPMENT OF UNFPA'S PUBLICATIONS PROGRAMME

5. Public information activities have been central to UNFPA's mandate since its inception. The Economic and Social Council (ECOSOC), in resolution 1763 (LIV) of 18 May 1973, stated that UNFPA should "promote awareness, both in developed and developing countries of the social, economic and environmental implications of national and international population problems, of the human rights aspects of family planning and of possible strategies to deal with them in accordance with the plans and priorities of each country". That was later reaffirmed by ECOSOC in its resolution 1986/7 of 21 May 1986.

6. At its thirty-seventh session in June 1990, the Governing Council supported "the important contribution of UNFPA publications and other public information efforts in promoting awareness, both in developed and developing countries, of population issues and their social, economic and environmental implications" (decision 90/35 A, para. 17). The Fund was urged, subsequently, by the General Assembly in resolution 45/216 of 21 December 1990 "to continue to undertake activities aimed at building up better awareness of population issues" (para. 13).

7. In November 1989, the International Forum on Population in the Twenty-first Century adopted the Amsterdam Declaration which urged UNFPA "to strengthen further the capacity of UNFPA to foster international awareness creation" of population matters. A year later, the Executive

Director reported to the General Assembly through the Governing Council and ECOSOC stressing that an indispensable component in efforts to increase and sustain the political support required to mobilize sufficient financial, human and institutional resources for population activities was a strong programme of information, education and communication aimed at political leaders, planners, parliamentarians, community and religious leaders and other policy makers.

8. Following the historic global consensus achieved at the ICPD in Cairo in 1994, UNFPA's information mandate was significantly increased to include leading advocacy efforts to promote the goals of the ICPD Programme of Action. At its annual session in June 1995, the Executive Board endorsed the core programme areas of UNFPA and requested the Executive Director to concentrate UNFPA assistance within the core areas of reproductive health, including family planning and sexual health, population and development strategies, and advocacy (decision 95/15, para. 4).

9. These resolutions and decisions have had a direct impact on UNFPA publications and public information activities, which are an integral part of UNFPA's advocacy efforts. Specifically, UNFPA must increase awareness of the role of population in the development process, build support for the goals of the ICPD and for UNFPA programme and resource-building strategies based on the Cairo consensus, and create and strengthen awareness of UNFPA's role in implementing the ICPD Programme of Action.

10. To carry out these mandates, UNFPA, primarily through its Information and External Relations Division (IERD), produces the following regular publications: UNFPA *Annual Report*, POPULI, a quarterly journal, *Dispatches*, a monthly newsletter on UNFPA policy and programme developments, *Population Issues Briefing Kit*, a primer for World Population Day and beyond; the *State of World Population*, a key report and important annual event in population information, and brochures and posters to promote World Population Day as well as the image and activities of the Fund. In addition, UNFPA produces two important reference tools in the *Inventory of Population Projects in Developing Countries Around the World* and the *Guide to Sources of International Population Assistance*. UNFPA also produces special publications in support of the ICPD and to enhance general population awareness.

11. Additionally, UNFPA carries out a number of specialized activities, including the establishment and maintenance of an Internet gopher site, in collaboration with the Population Information Network, for electronic dissemination of UNFPA information materials. E-mail is used for the dissemination of briefing notes on UNFPA-related issues to the network of UNFPA country offices.

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II. ANALYSIS OF UNFPA PUBLICATIONS

12. To supplement its own evaluations and periodic readership surveys and to help prepare this report, UNFPA commissioned an independent survey of all its publications to assess their effectiveness for their different targeted audiences. Opinions were sought from key media users of UNFPA publications, United Nations system information specialists, governments, UNFPA Executive Board focal points, NGOs involved in population activities, UNFPA field offices and important public affairs/public relations specialists. A questionnaire was prepared asking respondents to rate each of the Fund's publications from "most effective" to "least effective" and to make whatever comments they wished. The survey results, incorporated in this report, reflect the responses of targeted key sectors of the readership of UNFPA's publications programme, not the readership as a whole.

13. The overall response to the questions asked was extremely positive, indicating that the publications were read, well-received and accomplishing their purpose. The *Annual Report* was considered not only an excellent summary of the Fund's yearly activities, but a standard reference tool for government officials, UNFPA field offices and NGOs. The news media found the *State of World Population* report an important news event and reference tool.

14. All UNFPA publications, except the *Inventory of Population Projects in Developing Countries Around the World* and the *Guide to Sources of International Population Assistance*, are printed in, at the least, the three working languages of the United Nations (English, French and Spanish), as well as increasingly in Arabic. The *Annual Report* is published in all six official languages of the United Nations, and the *State of World Population* report is published in the six official languages of the United Nations, plus many other languages, notably those at the country level.

15. UNFPA publications are designed for specific audiences, especially for policy makers and senior programme managers, not for professional demographers. They are based on programme experience and the analyses of population issues carried out by other technical units of the United Nations system, especially the United Nations Population Division, and outside academic and research institutions. UNFPA's publications do not duplicate any of the publications of these other bodies but, rather, complement and supplement them, in addition to providing their own special perspective.

16. The remainder of this section examines the publications produced by UNFPA during 1995, noting in particular the purpose of each and its intended audience. It should be noted that each of these publications is distributed to all countries in which there is a United Nations office and/or a United Nations Information Centre.

State of World Population report

17. The Executive Director's *State of World Population* report is the centrepiece of UNFPA's worldwide media communications and advocacy efforts during the year. The most widely-read of UNFPA's publications, the report is sometimes perceived as the annual report of the Fund.

18. The *State of World Population* report has been published annually since 1978, and its release has become a major world media event. For the last several years, the major launch site for the report has been London, while UNFPA field offices worldwide conduct their own launches for local media and government officials. To meet the increasing demand for the publication, the print order has soared to 46,000 copies in 21 languages, including the six official languages of the United Nations.

19. The report has broken new ground in several respects: its primary audience, the media, has responded with great enthusiasm to its publication each year, and journalists regularly refer to the report as a source of information. Through seminars and workshops, the report has been used as a tool for raising awareness of population and development issues among the media. The publicity generated by the report has also played a significant role in creating awareness of population issues not only in developed countries but in developing countries as well.

20. The report has found increasing acceptability among other audiences, notably the population community, and is now regularly cited in professional journals. Schools and universities report that they draw on it in their courses, and there are regular requests for permission to use material from the report in publications. NGOs have found the report equally useful as a reference and educational tool.

21. In its subject matter, the report has frequently led the way to broader discussion of key issues. For example, the 1988 edition dealt with the interactions between population, development and the environment, 1989 was entitled "Investing in Women" and was a strong advocate for placing women at the centre of population and development activities; 1990 dealt with population and sustainable development, 1992 inter alia with the relationship between population and economic growth, and 1993 with migration. The 1994 *State of World Population* report was launched by the Executive Director to an overflow press conference attended by national and international reporters. Coming on the eve of the ICPD, the report facilitated the media's efforts to understand the various issues surrounding the conference and to explain these issues to the public. The report, which focused on the empowerment of women and reproductive health, followed closely the main themes of the draft ICPD Programme of Action and became a standard reference tool at Cairo, especially among the media. The 1995 report's detailed discussion of the components of reproductive health was particularly useful in explaining the significance of the comprehensive approach to reproductive health, including family planning and sexual health, endorsed by the ICPD.

POPULI

22. POPULI is the Fund's most visible periodical. Its goal, derived from the organization's mandate, is to promote awareness of population and related issues, policies, and programmes in both developed and developing countries. In so doing, it seeks to win respect for the Fund as a source of credible and timely information and comment, and to increase awareness of population's place in overall sustainable human development.

23. First published in 1974, POPULI was relaunched in 1992 as a general-readership news magazine. Readership nearly doubled in the first 12 months following its relaunch, of the recorded 92 per cent increase, almost evenly divided between developed and developing countries, the fastest growth in readership was among its key target audiences: the media, NGOs, and educational institutions. Indeed, among individual direct subscribers, journalists account for 39 per cent, academic institutions and libraries, 27 per cent, and NGOs, 14 per cent. Growth in readership has been sustained so that 44 per cent of current readers began reading POPULI after the 1992 relaunch, according to a mid-1995 survey.

24. Another indication of the usefulness of POPULI's special approach -- presenting a broad array of subject matter and opinion in language easily understood by a general readership -- is that 74 per cent of readers said that the information they found in POPULI was not easily available elsewhere, despite the fact that they also read many other leading population and development publications from the United Nations, NGO, academic, and commercial sectors. Sixty-two per cent of readers used the information gained from the magazine for their professional work, and 71 per cent, to inform others. Readers cited the variety of themes and the broad and sometimes critical perspectives presented as among the chief reasons for giving the magazine a "very good" rating.

25. More to the point of POPULI's aim of engendering discourse on population and development issues, media use of the magazine's contents has increased, with articles reproduced, excerpted, and cited widely in national media, especially but not exclusively in developing countries. At the same time, classroom use of POPULI in institutes of higher education and research in developing and developed regions is increasing, as is reproduction of the magazine's contents in textbooks and teaching kits for secondary schools. Even among general readers, 86 per cent share their copy with others; 49.6 per cent with one to five persons; 19 per cent with 10 or more.

26. Published four times a year in English, French and Spanish, 7,000 copies of POPULI are distributed by UNFPA field offices, UNDP and United Nations Information Centres, with another 6,200 individual direct subscriptions administered by UNFPA New York. The magazine's periodicity was reduced in mid-1995 from ten to four times a year in order to free up limited budgetary and staff resources to accommodate publication of the programme bulletin *Dispatches* (see below). However, 68.6 per cent of readers said they would prefer to continue to receive the magazine ten times a year.

Dispatches

27 Launched in 1995 and directed primarily at colleagues in UNFPA, the United Nations system, counterpart government agencies, and NGOs, *Dispatches* is a digest of programme and policy initiatives designed for a busy readership. Articles are presented for quick reading and include a list of sources of further information. The publication is meant to be easily photocopied or filed for future reference. It is highly rated by colleagues and counterparts alike as very useful for programme personnel, inter-agency communications, quick updates on project information, and as an easy means of informing government officials and NGO collaborators about developments in the Fund. In consequence, participation by field offices in gathering information for publication is increasing, as is use of *Dispatches* by the media as a source of ideas for coverage and as a background resource. Published ten times a year in English, French and Spanish, 10,000 copies of *Dispatches* are distributed through UNFPA offices and another 5,500 copies through UNDP, United Nations Information Centres, as well as to the media.

Annual Report

28 The *Annual Report* by the Executive Director, published in Arabic, Chinese, English, French, Russian and Spanish, is the basic information document about UNFPA activities. The aim of the report is to provide a composite picture of the Fund's work during the year under review. It is the only UNFPA public information document that combines financial and programme highlights of the Fund. The report focuses on new initiatives and notable developments in the UNFPA programme, particularly in individual countries and regions, and highlights programme achievements, as well as common problems and constraints and the measures taken to deal with them. The report is distributed free of charge to all interested officials in both developed and developing countries and to population experts and academics. Recipients also include UNFPA country offices, United Nations Information Centres, United Nations missions, NGOs active in the population and development field, libraries and demographic training institutes.

29 In recent years, the Executive Board has welcomed the new approach to the *Annual Report* with its focus on vital thematic issues and the use of lessons learned to support its analysis. The self-critical evaluation of the outcome of important projects and programmes was also appreciated by the Board. The detailed review in the report of regional activities as well as evaluation activities produced information and insights that were readily accessible and understandable.

30 The 1994 report was particularly helpful in explaining post-ICPD consultations and in linking recent United Nations world conferences to programme activities. Board members noted that the report clearly showed UNFPA's commitment to translating the recommendations of the ICPD Programme of Action into actions at the country level. They also welcomed the open discussion in the document on evaluation. As noted in the independent survey, the layout, typography and

illustrations give the report a sense of dealing with live vibrant issues, and not just a summary of a year's past activities.

31. Those surveyed rated the report as one of the Fund's most effective publications. They found the format improved, the financial and programme highlights, tables, and General Assembly and ECOSOC resolutions and Executive Board decisions very helpful, the information very useful for donors and recipients alike. They suggested that future reports include more details on country programmes and certain geographical regions not frequently treated.

32. About 28,000 copies of the report were printed in 1995, including 15,000 in English, 5,000 in French, 4,000 in Spanish, 2,000 in Arabic, plus approximately 1,000 each in Chinese and Russian.

Population Issues Briefing Kit

33. The *Population Issues Briefing Kit* is one of UNFPA's most in-demand publications after the *State of World Population* report. Its topics include reproductive rights and reproductive health, including family planning and sexual health; population, development and the empowerment of women; population and sustainable development; population trends in general and by region; migration and urbanization; population information, education and communication; population data and research; population programmes and the family. Published since 1990 and updated (statistics and message) each year with new sections on topics of concern and distributed widely on World Population Day, the *Briefing Kit* is directed at a general audience as well as towards people who know development but who may be less than fully conversant with the key role of population in development strategy. Distributed in four languages, the *Briefing Kit* is used as a reference tool by UNFPA staff, the public in general, government officials, journalists, other United Nations bodies, NGOs, researchers, and by universities and secondary schools. It is often cited as a source of population information in journals, magazines and other publications. Approximately 34,000 copies of the *Briefing Kit* were printed in 1995, including 18,000 in English, 7,000 in French, 5,000 in Spanish and 4,000 in Arabic.

Inventory of Population Projects in Developing Countries Around the World

34. The *Inventory* is the only compendium of its kind to provide concise information about internationally-assisted population projects in developing countries, funded or implemented by multilateral, bilateral and non-governmental organizations during a one-year period. It was launched in response to requests for a listing of population projects planned or in progress, in order to avoid duplication of assistance and to ascertain where, and what type of, assistance would be useful. The *Inventory* has been issued annually since 1975 and funded through the programme budget.

35. Since its inception, the former UNDP Governing Council regularly expressed support for the *Inventory*. By decision 86/34, the Council requested the UNFPA Executive Director "to continue producing on a regular basis the annual *Inventory of Population Projects in Developing Countries Around the World* ... and include in the *Inventory* an overview of major trends and developments in the population programmes".

36. The latest edition of the *Inventory*, published in 1995, provides information on programmes and projects in 156 developing countries, in addition to regional and interregional projects.

37. The main target audience for the *Inventory* are programme planners and policy makers. For 1995, 2,000 copies of the *Inventory* were produced, and initial distribution covered all agencies and organizations contributing information, as well as United Nations missions, UNDP Resident Representatives and UNFPA Representatives; senior officials of the United Nations, UNDP and specialized agencies; libraries, research institutes and training centres; and individuals and organizations active in the population field.

38. The main constraint on increasing the effectiveness of the *Inventory* relates to the amount of time required for the very extensive data collection efforts involved. However, despite the time lapse between the reporting period and the release date, the *Inventory* is still an invaluable source of information that cannot be obtained from any other publication. UNFPA, therefore, continues to explore ways for establishing an information system that can help automate data collection and respond faster to the needs of the target audience through electronic transmission.

Guide to Sources of International Population Assistance

39. The *Guide to Sources of International Population Assistance* was mandated by the 1974 World Population Plan of Action which called on UNFPA, "in cooperation with all organizations responsible for international population assistance, to produce a guide for international assistance in population matters which would be made available to recipient institutions and be revised periodically" (para. 105).

40. Issued triennially as a companion volume to the *Inventory*, the publication shows the types of technical and financial assistance in the population field that are provided by more than 200 multilateral, bilateral and regional agencies and NGOs, as well as universities, research institutes and training organizations.

41. Support for the *Guide* has been confirmed by the UNDP Governing Council on several occasions. At its thirty-sixth session, the Council again requested the UNFPA Executive Director "to continue producing on a regular basis ... the triennial *Guide to Sources of International Population Assistance*" (decision 86/34).

42. Like the *Inventory*, the *Guide* is widely used by individuals and organizations concerned with the funding or implementation of population programmes and projects. The process of data collection and distribution is undertaken jointly with the *Inventory* for better coordination and cost-effectiveness. While both publications share the same main target audience, the *Guide* is also used for general information purposes among the wider public. The 1994 edition of the *Guide* had a print run of 3,000 copies in view of the special needs of the ICPD.

43. The *Guide* is unique in the scope of information provided, as it covers different types of organizations and is not limited to any geographical area, compared to other handbooks. However, given the frequent changes inherent in development assistance, the accuracy of the information in the *Guide* declines considerably in the last year of each edition and reduces the publication's usefulness. UNFPA has reviewed the possibility of turning the *Guide* into an annual publication, but resource constraints have so far precluded this option.

Summary of Programme of Action

44. As an initial step to assist the ICPD task force that was set up to promote the Cairo goals, UNFPA, together with the United Nations Population Division and the United Nations Department of Public Information (DPI), published a summary of the ICPD Programme of Action in four languages, Arabic, English, French and Spanish, and distributed more than 30,000 copies worldwide. The remaining stock (some 20,000 copies) was used to meet daily requests and for special seminars and meetings which required bulk copies.

Advocating Change

45. *Advocating Change*, dealing with population, empowerment of women and development, is the first of a series of in-depth publications aimed at explaining in a clear and simple manner the implications of the ICPD. The purpose of these publications is to encourage advocacy for the goals of the ICPD, and they are written specifically for government leaders, NGOs and individuals who want to see the ICPD Programme of Action adopted in their own countries. Other subjects that will be covered by this series include: reproductive health; migration; male attitudes; and women and employment.

Brochures

46. The Fund requires for its daily operations a number of general information brochures that can quickly explain the scope of its mandate and activities. The principal brochure features UNFPA, its structure, mandate, activities, funding and geographic reach. A smaller companion piece gives a

shorter summary for those who do not need a more extensive explanation. UNFPA also produces brochures in support of the ICPD and general population awareness.

III. COST MANAGEMENT

47. UNFPA has taken maximum advantage of new technology in producing and disseminating its publications, improving quantity and quality, cutting production costs and enabling a wider choice of suppliers. POPULI and *Dispatches*, for example, are now prepared for press entirely in-house. The timely and accurate publication of the *State of World Population* report in a variety of sites and languages is enabled by electronic communications. Better communications via the Internet and improved software enable quick exchange of proofs and designs between UNFPA and contractors wherever they may be.

48. To carry out its mandate from ECOSOC to promote awareness in both developed and developing countries, UNFPA uses the full range of modern communications media, including print, video, film, radio and electronic channels. To best conserve scarce resources, UNFPA relies on long-established United Nations cost-management procedures and applies them to all UNFPA information materials. The cost-management procedures include competitive bidding for printing and ancillary contracts, public opening of bids, and review and approval of all contracts by an internal Contracts Review Committee. In the print area, the number of copies to be printed for each publication is carefully analysed beforehand to determine the size of the market and to take into consideration, when applicable, past experience and projected demand. As a result, the supply of most UNFPA publications is usually exhausted within an 18-month period while the publication is still up-to-date.

49. Greater use is being made of the Internet to ensure the widest possible dissemination of UNFPA information materials at virtually no cost to the organization. UNFPA has been distributing information materials electronically on the Internet since 1993, starting with ICPD newsletters and briefing kits. In collaboration with the UNFPA-funded Population Information Network (POPIN, located in the United Nations Population Division, Department for Economic and Social Information and Policy Analysis), a variety of UNFPA materials are now available via a "gopher" (a widely used type of Internet-accessible database). These include: Basic Facts About UNFPA, UNFPA press releases, the 1995 *State of World Population* report (in English, French and Spanish), *Dispatches* (since September 1995), POPULI (since December 1995) and the 1995 *Population Issues Briefing Kit*. Also available on the gopher are most 1995 statements of the Executive Director and documentation from the UNFPA-led Task Force on ICPD Implementation.

50. The UNFPA survey found a very positive response to its public information on the Internet. Several thought it one of the best information resources produced by UNFPA. They noted that the Internet gopher kept them up-to-date by providing a wealth of information ranging from the full text of conference documents to population-related journals to links to other population resources.

51. In December 1995, UNFPA established a site on the World Wide Web on the Internet (http://www.unfpa.org), initially allowing easy access to published materials included on the gopher. More features, including graphics and sound, are being added.

52. The Web offers UNFPA a new publishing medium. A Web site is not a substitute for printed publications, but it does offer wide distribution at low cost and has many other advantages as well. UNFPA will use the Web to: (a) publicize the audio-visual and print products of the Fund, especially the *State of World Population* report, and to make their text and graphics readily available, (b) add to and update material on ICPD follow-up, and make technical publications available, (c) monitor interest in UNFPA and its publications, and to receive comments and communications from the public; (d) communicate with individuals in governments, the population and development community, NGOs, media and parliamentarians. The UNFPA web site will be linked to United Nations and other sites worldwide.

IV. RECOMMENDATION

53. The Executive Director recommends that the Executive Board take note of the report on the effectiveness of the UNFPA publications programme as contained in document DP/FPA/1996/14, in particular its central role in advocacy in the area of population and development.

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UNITED NATIONS POPULATION FUND

A REVISED APPROACH FOR THE ALLOCATION OF UNFPA RESOURCES TO COUNTRY PROGRAMMES

Report of the Executive Director

Summary

This report has been prepared in response to decision 96/10, paragraph 3, which noted the report of the Executive Director (DP/FPA/1996/1) and requested the Executive Director to submit to the Board at its second regular session 1996 a revised document reflecting the comments made by the members of the Board on the new approach for the allocation of UNFPA resources during the Board's first regular session 1996.

This report calls for a decision by the Executive Board to approve the revised proposed approach for the allocation of UNFPA resources to country programmes.

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I. INTRODUCTION

1. Following the 1994 International Conference on Population and Development (ICPD), UNFPA undertook a thorough review of the implications of the Programme of Action for the activities of the Fund and submitted a report to the Executive Board at its annual session in June 1995 on programme priorities and future directions of UNFPA in light of the ICPD (document DP/1995/25 and Corr.1). After debating the report, the Executive Board endorsed the new programme priorities and took note of the proposed new UNFPA system for resource allocation (decision 95/15). It also invited the Executive Director to refine the approach for resource allocation to countries, as contained in document DP/1995/25, and to report thereon to the Executive Board at its first regular session in January 1996. Accordingly, the Executive Director presented document DP/FPA/1996/1 on "A new approach for allocation of UNFPA resources to country programmes". After noting the report, the Executive Board decided to continue the consideration of the topic at the second regular session 1996, on the basis of a new report, based on the comments made by the Executive Board on DP/FPA/1996/1 (decision 96/10).

2. This report is being submitted in response to that request. The report briefly reviews the evolution of the present system whereby UNFPA has been designating priority and non-priority (other) countries for resource allocation; presents a new approach for allocating resources to country programmes; and analyses the implications of the new approach. The report concludes with a recommendation and a set of elements for a decision for consideration by the Executive Board.

II. BACKGROUND

3. UNFPA is expected to provide assistance to all countries that request it. While maintaining this principle, the former Governing Council requested the Fund to develop a system of resource allocation that would focus resources on the countries most in need of UNFPA assistance. This system began to function in 1977 utilizing various socio-economic and demographic criteria and thresholds to designate priority countries for UNFPA assistance. The criteria and thresholds used were periodically reviewed, revised (if necessary) and approved by the Governing Council to reflect changes in demographic and socio-economic conditions in developing countries.

4. There has been a continuing discussion between UNFPA and the former Governing Council and the present Executive Board on the system used to allocate resources to priority countries. The most recent report, submitted to the Governing Council at its fortieth session (1993), was the "Report of the Executive Director reviewing the Fund's experience in implementing the priority-country system" (document DP/1993/33). Previous reports of the Executive Director to the various sessions of the Council on UNFPA's experience with the system of priority countries are provided in the notes.[1] Additionally, the Executive Director includes information regularly on priority countries in the programme highlights section of the Fund's annual report.

5. To determine which countries had the greatest need for external financial assistance, the Fund selected, under the priority-country system, one economic indicator [per-capita gross national product (GNP)] and various demographic and socio-economic indicators. The indicators selected were considered indicative of major population problems and the level of development of a country. The priority status of countries was determined by applying certain threshold levels for the demographic and socio-economic indicators and by an upper limit for the level of GNP per capita income. Under the present system, for a country to be given priority status, it must have a GNP per capita of $750 or less and satisfy any two of the following five criteria and threshold levels: (a) annual increment of 100,000 or more to total population; (b) gross reproduction rate of 2.0 or more; (c) infant mortality rate of 120 per 1,000 live births or more; (d) density of agricultural population on arable land of 2.0 persons or more per hectare; and (e) female literacy rate of 40 per cent or less.

III. UNFPA'S EXPERIENCE WITH THE SYSTEM OF PRIORITY COUNTRIES

6. A brief analysis of UNFPA's experience with the system of priority countries is presented below. Table 1 shows the number of priority countries by region in 1983, 1988 and 1994. Table 2 presents the distribution of expenditures in priority countries for selected years, expressed as a percentage of total expenditures for country programmes. In the implementation of the priority-country system special attention was always paid to the needs of low-income countries, the least developed countries (LDCs) and Africa.

Table 1. Distribution of countries by priority status and region (number of countries)

Region	1983	1988	1994
Sub-Saharan Africa	30	31	32
Asia and the Pacific	16	16	17
Latin America and the Caribbean	2	3	5
Arab States and Europe	5	5	4
Total	**53**	**55**	**58**

Table 2. Number of priority countries and distribution of UNFPA expenditure by priority status

Priority status	1983	1988	1992	1994
Number of priority countries	53	55	58	58
Percentage of expenditure	70%	72%	76%	71%
Number of non-priority countries	98	98	92	92
Percentage of expenditure	30%	28%	24%	29%
All countries	100%	100%	100%	100%
Total country programme expenditure (in millions)	$73.5	$89.9	$102.9	$160.2

7. The target set for allocations to priority countries was successively increased by the Governing Council from 66.6 per cent of country programme resources in 1977 to 75.0 per cent in 1988 and to 80.0 per cent in 1990. The Fund has utilized these targets to concentrate its programming resources in the countries identified as priority countries. The 80 per cent target set for priority countries as a group has not been achieved due to a number of reasons. These are, most importantly: (a) priority countries with large populations were subjected to ceilings for resource allocations; (b) large allocations to LDCs could not always be expended in those countries because of their low absorptive capacities; and (c) civil strife and internal disturbances in several other priority countries did not permit rapid and/or full implementation of programmes.

8. The remainder of this report will present and analyse a revised approach to resource allocation to country programmes taking into account the relevant provisions of the ICPD Programme of Action and the views expressed by delegates during the discussion of this item at the Board's annual session in 1995 and the subsequent discussion of this topic at the first regular session in 1996 as well as informal discussions of the Executive Board.

IV. TOWARDS A REVISED APPROACH FOR RESOURCE ALLOCATION

9. As endorsed by the Executive Board in decision 95/15, UNFPA will concentrate its funding in three core areas: (a) reproductive health, including family planning and sexual health; (b) population and development strategies; and (c) advocacy. The selection of these three core areas will enable UNFPA to sharpen the strategic focus of its programming and to capitalize on its comparative advantage and experience in the field of population and development. It will also allow the Fund to pursue a holistic approach in addressing the specific population needs of individual countries.

10. Following the ICPD in 1994 and the new directions that it recommended for activities in the area of population and development, the Fund recognized that its strategy for resource allocation to developing countries needed to be revised. This was further reinforced by the discussion, and subsequent adoption of decision 95/15, on this issue at the annual session of the Board in 1995. Experience with country programmes across the developing world showed that differential progress had been achieved in individual countries in the area of population and development, that there were different levels of need of countries for multilateral assistance, and that there was an urgent need to enhance the effectiveness and impact of population programmes. International development cooperation has to take these varied situations into account while respecting the needs, priorities and policies of developing countries.

11. Accordingly, in document DP/1995/25 (paras. 71 to 74), the Fund outlined a new approach to resource allocation based on the principles and goals recommended in the ICPD Programme of Action as follows:

(a) All countries seeking UNFPA assistance should adhere to the basic principles of the ICPD Programme of Action;

(b) Technical assistance will be provided to all developing countries requesting it;

(c) Financial assistance will be focused on countries with the lowest level of achievement with regard to ICPD goals related to access to reproductive health and family planning services, access to education by girls and women; and levels of infant and maternal mortality;

(d) Financial assistance to countries that are close to or have already surpassed ICPD goals will be phased out or limited in scope and amount;

(e) Temporary assistance will be provided to countries with economies in transition, particularly for family planning and reproductive health;

(f) South-South cooperation will be promoted.

12. The Executive Board reviewed this approach at its annual session in June 1995 and, in decision 95/15, invited the Executive Director "to refine the proposed approach, based on the relevant provisions of the Programme of Action of the International Conference on Population and Development, including paragraphs 14.14, 14.15 and 14.16, as well as on other relevant qualitative and quantitative indicators". It also noted that special attention should be paid to the needs of LDCs and Africa. The critical situation in Africa is of priority concern. Africa is the only region where poverty is expected to increase. Lack of infrastructure and institutions, of human resource

development and of food security, and unemployment and underemployment characterize the continent.

13. The Programme of Action in paragraphs 14.14, 14.15 and 14.16 recommends that criteria for allocation of external resources should include the coherence of national programmes and plans on population and development and the need for external resources to complement national financial efforts. These paragraphs also recommend that resource-allocation decisions should take account of the recognized priority to the LDCs and problems of significant social sectors and regions not reflected in national averages. Furthermore, the Programme of Action states that countries with economies in transition should receive temporary assistance for population and development activities in light of the difficult economic and social problems these countries face at present. The Programme of Action also urges that more attention should be given to South-South cooperation and to the new ways of mobilizing private contributions, particularly in partnership with non-governmental organizations (NGOs).

14. On the basis of the directions suggested by the Executive Board, the Fund has further refined the approach for allocating resources to country programmes. Although the revised approach builds upon the current priority-country system, it is substantially different. First, the revised approach is based on a country's level of achievement of ICPD goals. Secondly, the revised approach recognizes that there is a continuum of needs, from countries that have made little progress towards achieving the ICPD goals to countries that have already reached or surpassed all of these goals. Thirdly, the revised approach pays special attention to low-income countries, LDCs and sub-Saharan Africa. Fourthly, the revised approach recognizes the urgent need for providing temporary assistance to countries with economies in transition. Finally, it recognizes the importance of promoting South-South cooperation.

V. ELEMENTS OF A REVISED APPROACH FOR RESOURCE ALLOCATION

15. The revised approach for allocating UNFPA resources to country programmes will function at two levels. First, indicators of ICPD goals (described below) will be used together with an indicator of income to group countries according to the level of their needs for external assistance in the area of population and development. Second, further criteria, including those mentioned in the Programme of Action in paragraph 14.14, will then be employed to distribute resources to individual countries within each group. In the first stage, countries will be grouped according to quantified indicators, whereas the second stage, as in the past, will rely on technical and qualitative country-specific assessments including the evaluations made by UNFPA's programme review and strategy development (PRSD) missions (see paragraph 42 below). This two-stage approach allows greater flexibility in allocation decisions and thus is better suited for responding to temporary or *ad hoc* situations that may alter the capacity of certain countries to use external assistance.

16. In developing this approach, UNFPA undertook an extensive analysis of the present situations in developing countries with respect to the major ICPD goals and, in particular, the current levels the countries had reached on a range of indicators. On the basis of this analysis, and in consultation with a group of experts from outside UNFPA, the Fund selected seven indicators, described below, for measuring progress towards the achievement of these ICPD goals. Threshold values for each of the seven indicators for the year 2005 were also formulated, again in consultation with the same group of external experts.

A. Selection of ICPD-goal indicators

17. As discussed, the revised approach for resource allocation will make use of the quantitative goals recommended by the ICPD Programme of Action. The ICPD document lays out specific longer-term goals in three major areas to be met over the next two decades, as well as intermediate goals to be achieved within one decade (by the year 2005). These areas are:

(a) Access to reproductive health. All countries should strive to make reproductive health services accessible to all individuals of appropriate ages through the primary health-care system, as soon as possible and no later than the year 2015. The ICPD Programme of Action also states that all countries should, over the next several years, assess the extent of national unmet need for good-quality family-planning services and address that need within the context of a reproductive health framework. All countries should take steps to meet the family-planning needs of their populations as soon as possible and should, in all cases by the year 2015, seek to provide universal access to a full range of safe and reliable family-planning methods and to related reproductive-health services that are not against the law;

(b) Mortality reduction. The ICPD Programme of Action makes specific recommendations concerning infant mortality, stating that, by the year 2005, countries with intermediate mortality levels should aim to achieve an infant mortality rate below 50 deaths per 1,000 live births. It also states that countries that achieve this level earlier than 2005 should strive to lower the level further. With regard to maternal mortality, the ICPD recommends that countries with intermediate levels of mortality should aim to achieve, by the year 2005, a maternal mortality rate below 100 per 100,000 live births. Countries with the highest levels of mortality should aim to achieve by 2005 a maternal mortality rate below 125 per 100,000 live births;

(c) Universal education, especially of girls. The eradication of illiteracy is one of the prerequisites of human development. All countries should consolidate the progress made in the 1990s towards providing universal access to primary education, as agreed upon at the World Conference on Education for All, held at Jomtien, Thailand, in 1990, notably in ensuring universal access to primary education. The Programme of Action states that beyond the achievement of the goal of universal primary education in all countries before the year 2015, all countries are urged to ensure

the widest and earliest possible access by girls and women to secondary and higher levels of education.

18. The UNFPA approach for resource allocation will explicitly take into account the situation in each country with respect to the progress it has achieved towards attaining these goals, as will be described in the later sections of the report.

19. In selecting a set of indicators to measure these goals, the following important considerations were taken into account: (a) each indicator should objectively measure an important dimension of the goal; (b) each indicator should have a uniform meaning and definition; (c) data should generally be available for all developing countries from internationally recognized sources; and (d) data should be recent and available for the same period. The indicators selected in the following three sub-sections were chosen by taking these fundamental criteria into account.

1. Indicators related to access to reproductive-health services

20. Ideally, to measure the reproductive-health goals set out in the Programme of Action, indicators on the ease of access to a full set of reproductive-health services, including family planning and sexual-health services, would be required. They should be complemented by other indicators that would gauge the quality of the services provided. However, such indicators are not widely available, and much methodological work needs to be done to develop such indicators and to obtain them through national data systems -- work that the Fund is actively supporting, along with the World Health Organization (WHO) and other concerned agencies.

21. There are, nonetheless, indicators available from international sources on some key aspects of reproductive health. The degree to which deliveries are attended by trained health personnel is an important aspect of reproductive health services. Furthermore, the fact that such attention is available at the time of delivery indicates the probable existence of a health system that is responsive to other reproductive-health elements such as ante-natal care. WHO compiles national data on the proportion of all deliveries that are attended by trained health personnel.[2] Data for this indicator are available in most developing countries for a recent period. This indicator is therefore proposed for inclusion in the revised approach for resource allocation until such time that more appropriate indicators of reproductive health become available.

22. Another important element of reproductive health that is highlighted in the ICPD Programme of Action is access to quality family-planning services. Ideally, measurement of this element would include the range of contraceptive methods available, the cultural acceptability of the services provided, the waiting period of clients, the amount of counselling provided during client-provider interactions, as well as other indicators of quality of service. Although such indicators sometimes exist within individual family-planning programmes, they are not widely available internationally; nor,

in general, do such indicators always conform to internationally agreed definitions. Quality-of-care indicators in particular are often subjective in nature and, while useful for improving services within individual programmes, are not suitable for international comparative purposes.

23. A measure of access and utilization of family-planning services is the prevalence of contraceptive use. Although it gives only an approximate indication of the full range of a quality programme, and only partially reflects the extent of access, the contraceptive prevalence rate (for all methods) is a statistical measure that is widely available and generally of good quality. While it is evident that an index including several facets of access to quality services would be preferable, until such an indicator becomes widely available, the contraceptive prevalence rate (CPR) may be used as a proxy measure. This indicator is well measured through such data-collection schemes as demographic and health surveys. Moreover, in cases where it is not directly available, indirect procedures exist to obtain usable estimates.[3] UNFPA, therefore, proposes to use the contraceptive prevalence rate in the revised approach for resource allocation.

24. Another important element of reproductive health is the degree of access the population has to services. Access should be defined not just in terms of physical proximity to service points but should also reflect the infrastructure, resources and supplies available at the points of service as well as indications of quality of care. As mentioned, for many of these aspects, internationally standardized measures are not yet available. Data are widely available, however, on access to basic health services, which thus may be used as a proxy indicator. Given that the reproductive-health elements that UNFPA will support through its country programmes will be centred in primary health care systems, the proportion of the population that has access to basic health services[4] will be included as an indicator of the achievement of the ICPD reproductive-health goals.

2. Indicators related to mortality reduction

25. As indicated above, the Programme of Action specifies goals for mortality reduction as well as the indicators to be used to measure such reductions. The infant mortality rate is widely available, accurately measures the phenomenon and has an internationally standardized approach to its measurement. For these reasons, this indicator has been part of the Fund's resource-allocation system since its inception and is proposed for continuation in the new approach as well.

26. Maternal mortality is an important measure for mortality reduction, especially as it has implications for the acceptability, quality and level of reproductive-health services. The maternal mortality ratio (MMR) is now widely available as an indicator of maternal mortality. While the reliability of the MMR is not as high as it is in the case of the infant mortality rate and is subject to random errors in countries with small populations, this indicator is being subjected to methodological scrutiny by interested international organizations (e.g., WHO, UNICEF, UNFPA), and the acceptability of national estimates is growing.[5] In view of its importance to achieving ICPD goals

in both reproductive health and mortality areas, the MMR will be included as an indicator in the proposed approach.

3. Indicators related to education, especially of women and girls

27. Ideally, information on the proportion of children, and in particular of girls, who complete primary education (and secondary education in cases where primary education goals have been largely met) would be desirable for measuring the education goals set out in the Programme of Action. Such data, however, have to come from special surveys and for this reason are not widely available. There are several indicators that could be used. The best known indicators are the gross enrolment and net enrolment rates. Of the two, data on gross enrolment are more widely available and give a fair approximation of current attendance levels of children at schools. Thus, the Fund proposes to include gross female enrolment rate at the primary level in the revised approach for allocating resources.[6]

28. For assessment of level of achievement of the educational goals of the ICPD Programme of Action, data on the educational level of adult females are also needed. Information on attainment of different educational levels in a standardized form is not widely available and, moreover, would change only slowly over time as older cohorts are replaced by younger ones. Literacy campaigns for adults, on the other hand, may quickly change the ability of adults to address their personal needs and concerns. UNESCO collates country-specific reports on literacy and provides international estimates of levels of literacy. These data, although subject to a number of conceptual and measurement problems, allow an indication of progress made towards improving the literacy of women, not just of girls. For these reasons, UNFPA proposes to use, as it has been doing in the past, the adult female literacy rate in the new approach for resource allocation.[7]

B. Thresholds: Levels for the year 2005

29. Threshold levels for the year 2005 were developed for each of the seven indicators based on goals set out in the ICPD Programme of Action. Medium-term goals for the year 2005 are suitable for programming purposes since they present a practical time horizon for formulating plans and strategies and for measuring progress towards achieving the longer-term goals for the year 2015.

30. In the case of the mortality indicators, specific mortality-reduction targets are suggested in the Programme of Action itself and thus have been used here. For the other five indicators -- that is, those related to access to reproductive-health services and to education -- thresholds were established by considering both the current (1995) situation of developing countries, and in particular the levels reached by the least developed countries, as well as the ICPD goals for the year 2015. In general, mid-points between these two levels were chosen as thresholds for the year 2005. The thresholds thus represent medium-term goals that could feasibly be attained by the year 2005, particularly if

sufficient resources -- along the lines set out in the ICPD Programme of Action in paragraphs 13.15 and 14.11 -- are made available.[8]

31. The seven indicators thus selected for inclusion in the revised approach for resource allocation and their recommended thresholds are given below in table 3. It should be noted that, by including three indicators related to the goal of attaining full access to reproductive-health services, including family planning and sexual health (as opposed to two indicators each for the goals related to mortality reduction and education), extra weight is being given to the reproductive-health dimension, in line with the programming priorities endorsed by the Executive Board in decision 95/15. The indicators selected also reflect the cross-sectoral ICPD goal pertaining to the empowerment of women.

Table 3. Indicators and threshold levels

Goal / Indicator	*Threshold*
Goal: Access to reproductive health	
1. Proportion of deliveries attended by trained health personnel	≥ 60 per cent
2. Contraceptive prevalence rate	≥ 55 per cent
3. Proportion of population having access to basic health services	≥ 60 per cent[9]
Goal: Mortality reduction	
4. Infant mortality rate	≤ 50 infant deaths per 1,000 live births
5. Maternal mortality ratio	≤ 100 maternal deaths per 100,000 live births
Goal: Universal primary education	
6. Gross female enrollment rate at the primary level	≥ 75 per 100 eligible population
7. Adult female literacy rate	≥ 50 per cent

C. Categorization of countries using the revised approach

32. One of the guiding principles in developing the revised approach to resource allocation is the recognition of a continuum of needs in developing countries for external assistance for population and development activities. Using the most recent data available and period rates for the indicators where

appropriate, the Executive Director proposes a system for categorizing countries into three groups according to their needs for specific types of assistance and their circumstances with regard to the progress they have made in different facets of the Programme of Action.[10]

33. Group A. The first group of countries, Group A, will include developing countries in which both of the following conditions are met: (a) greatest distance from achieving ICPD goals, and (b) low levels of development. Countries where the first condition obtains are those which have met the threshold levels of only 0-3 indicators. Countries with low levels of development, the second condition, include all LDCs[11] and/or all countries with a GNP per capita of less than $750.[12] This formulation specifically takes into account decision 1995/51 of the Economic and Social Council which calls on United Nations funds and programmes to continue to give high priority in their budget allocations to the LDCs, low-income countries and Africa.

34. Countries in Group A have the greatest needs for external assistance and, at the same time, the lowest capabilities for mustering domestic resources. It is proposed to concentrate the Fund's resources on Group A countries in a flexible manner by allocating 65 to 69 per cent of country-programme resources to this group as a whole.[13] These countries, in particular, would be eligible for UNFPA support for comprehensive population and development programmes. In particular, national capacity-building activities will be given high priority for countries in Group A, including support to local costs, institutional development and human resources development.

35. Group B. Countries to be included in Group B are those that have made considerable progress towards achieving the ICPD goals or which have higher levels of development. In operational terms, developing countries that have met the threshold levels for 4-6 indicators or whose GNP per capita is $750 or more will be placed in Group B. It is proposed to allocate 22 to 24 per cent of UNFPA programme resources to the countries in Group B as a whole, again in a flexible manner.

36. As the countries included in Group B in most cases will have made substantial progress in achieving the ICPD goals, UNFPA assistance will often focus on specific needs and thematic areas as identified through strategic assessments, especially the PRSD exercise. In some cases, countries in Group B will still need comprehensive support in some low-income and underdeveloped regions within national territories.

37. Group C. The third group (Group C) includes developing countries that have met the thresholds for all seven ICPD-goal indicators. As part of the new approach to allocation, it is proposed that, as a group, they receive 5 to 7 per cent of programme resources, again in a flexible manner.

38. Countries in Group C have demonstrated significant progress in terms of achieving all ICPD goals. It will be important that UNFPA assistance to these countries be focused in such a way as to ensure that the gains already made are not compromised by adverse economic situations and/or other developments. As specified in the Programme of Action, assistance for South-South cooperation would be focused on Group C countries -- while still providing some assistance for South-South cooperation to countries in the other groups -- to help them share their successful experiences with other countries in all the groups.

39. Countries with economies in transition. In addition to the three groups of developing countries described above, the countries with economies in transition -- as noted in the ICPD Programme of Action (paragraph 14.15) -- will have specific needs for external assistance on a temporary basis. It is proposed that 3 to 4 per cent of country-programme resources be allocated for countries with economies in transition, using flexibility in the application of this proportion. It is expected that the need for assistance to these countries will diminish in the future and that the bulk of resources allocated to this group will be concentrated in the Central Asian Republics and Kazakstan (CARK) subregion.

D. Distribution of resources to individual countries

40. At the outset, it should be clear that to receive UNFPA assistance a country must adhere to the principles set out in the ICPD Programme of Action.

41. Following the discussions of the Executive Board in January 1996, the distribution of resources to individual countries within each broad group would be approached with a great deal of flexibility. The amount and type of resources allocated to each country, as in the past, would be largely determined by a comprehensive assessment of the country's actual needs and capacities. Since many of the criteria upon which the level of external assistance to a particular country would depend are qualitative in nature, flexibility in assigning resources at this level should be maintained.

42. In this connection, the PRSD methodology has been developed by the Fund for assessing the needs of a country for assistance from external sources. The government concerned is fully involved in the exercise, the findings of which have become the principal tool for programming UNFPA resources at the country level. It should also be mentioned here that, in undertaking a PRSD exercise, all other relevant assessments of development needs for the country including the Country Strategy Note as well as plans from other agencies and organizations, both within the United Nations system and outside, are integrated into the overall assessment concerning population and development needs.

43. The strategy developed through the PRSD mechanism provides a basis for deciding on the type of activities as well as the level of support for country programmes. There are, however, other considerations that would be taken into account in determining the level of assistance to a given

country. The importance of its level of development vis-à-vis other countries in the same group would also be considered as a factor.

44. Moreover, the commitment of a country to cope with its population problems and to assign domestic resources to population-development programmes will be taken into account. As a result of the ICPD, a global commitment has emerged for an integrated approach to population and development issues, encompassing universal access to basic education and health services, including reproductive-health services, and gender equity and equality. Countries lacking such commitment will need assistance, especially for activities in the core programme area of advocacy.

45. Other factors that would have a bearing on the level of assistance to individual countries include the size and growth rate of the population and the availability, if any, of external assistance from other donors to complement national financial efforts for activities in the areas of population and reproductive health. These are all factors that, taken together, may often be difficult to measure in quantitative terms but that require careful assessment in order to ensure the effectiveness and impact of the activities the Fund supports. The Fund has developed, over the years, an in-depth and flexible approach in this regard and will build on it in the implementation of the revised approach in the future.

VI. IMPLICATIONS OF THE REVISED APPROACH

46. The proposed approach was applied to 111 developing countries with populations of 150,000 or more.[14] Table 4 contains an analysis of the implications of the revised approach for resource allocation.

Table 4. Grouping of countries and selected features

Groups	No. of Countries	Share of Total Population (1995)	Share of resources	
			Current	Proposed
Group A	60	45 %	51 %	65-69 %
Group B	39	24 %	35 %	22-24 %
Group C	12	31 %	11 %	5-7 %
All Groups	111	100 %	100 %*	100 %**

* Includes about 3 per cent for countries with economies in transition, as well as other countries not included in this table.
** Includes 3 to 4 per cent for countries with economies in transition and 0.5 per cent to other countries not included in this table.

47. As can be seen in the table, 60 countries are classified in Group A, including all 48 LDCs. In all, these 60 countries comprise 45 per cent of the developing world's total population in 1995. Currently, they receive 51 per cent of the Fund's total resources for countries.

48. Group B contains 39 of the 111 countries, comprising 24 per cent of the total 1995 population of developing countries. Group B countries currently receive 35 per cent of country-programme resources.

49. Twelve of the 111 countries have met the thresholds for all seven indicators and thus comprise Group C. In 1995, these countries accounted for 31 per cent of the total population of developing countries. Group C countries currently receive 11 per cent of UNFPA country-programme resources.

50. Of the 60 countries in Group A, 37 are from the sub-Saharan African region (accounting for 84 per cent of all sub-Saharan African countries); 16 countries are from Asia and the Pacific, 2 countries are from Latin America and the Caribbean; and 5 countries are from the Arab States. For Group B, the distribution is as follows: 6 countries are from the sub-Saharan African region; 7 countries are from Asia and the Pacific; 18 countries are from Latin America and the Caribbean; and 8 countries are from the Arab States. Finally, in Group C, there is one country from the sub-Saharan African region; 5 countries from Asia and the Pacific; and 6 countries from Latin America and the Caribbean.

51. A periodic review, once every five years, of the revised system for allocating UNFPA resources would be undertaken to adjust the system to reflect the progress achieved in individual countries towards attaining the ICPD goals. The review would also be used to reassess the threshold values of the indicators used as well as to recommend alternative indicators as they become available.

52. The revised approach for resource allocation would be introduced in a phased manner and with care so as not to disrupt ongoing programmes abruptly. The revised approach, therefore, would be applied on a case-by-case basis, taking into account both the stage of the current cycle of assistance and level of programme implementation. For the most part, the revised approach would be applied to individual countries as they begin their next programme cycles. Hence, the new proportions proposed for allocations to Groups A, B and C would be achieved gradually, as more and more new country programmes are approved.

VII. ELEMENTS FOR A DECISION

53 The Executive Board may wish to:

1. Take note of the report on a revised approach for the allocation of UNFPA resources to country programmes (document DP/FPA/1996/15) and of the comments made thereon by the Executive Board;

2. Endorse the approach for resource allocation contained in the report, including the indicators and threshold levels towards meeting the goals of the International Conference on Population and Development (ICPD) for the year 2005;

3. Reaffirm the need to give special attention to the least developed countries, to low-income countries and to the sub-Saharan African region;

4. Endorse the procedure for categorization of countries into Groups A, B and C as outlined in the report and approve the relative shares of resources as described in table 4 of the report;

5. Endorse the proposal that 3 to 4 per cent of country programme resources be allocated, on a temporary basis, for countries with economies in transition;

6. Recommend that the distribution of resources to individual countries be made in a flexible manner in line with the section of the report titled "Distribution of resources to individual countries";

7. Recognize that some countries may still continue to require programme support in selected thematic areas to assure that the gains already made are not compromised by adverse economic situations;

8. Recommend that the revised approach for resource allocation be introduced in a phased manner, taking into account both the stage of the current cycle of assistance and status of programme implementation in individual countries;

9. Request the Executive Director to undertake a quinquennial review of the system for resource allocation, including an assessment of the indicators and their threshold levels, and to report thereon to the Executive Board starting in the year 2000;

10. Also request the Executive Director to provide in her annual report information on the level of allocations to the categories of countries in line with the revised approach.

Notes

1. The reports, listed in order of submission, are: "Allocations of UNFPA resources and proposed alternate funding arrangements" (document DP/118); "Priorities for future allocations of UNFPA resources" (DP/186); "Application of criteria for establishing priorities" (DP/232); "Application of criteria for establishing priorities" (DP/263); "The future role of UNFPA: UNFPA in the 1980s" (DP/530); "The UNFPA experience with the system of priority countries" (DP/1982/30/Add.1); "The experience gained by the Fund in using the present set of criteria for selecting priority countries" (DP/1986/38); "The programming experience of the Fund in using the existing set of criteria and suggestions for modification of the criteria in the designation of priority countries" (DP/1988/38); and "Report of the Executive Director reviewing the Fund's experience in implementing the priority-country system" (DP/1993/33).

2. This indicator is defined as the proportion of births attended by a doctor, a registered midwife or a trained traditional birth attendant. See WHO, Coverage of Maternal Care, 3rd ed., 1993. Data cover the period 1983-1993.

3. This indicator is defined as the proportion of women of reproductive ages (generally aged 15-49) who are currently using any method of contraception. See United Nations Population Division, World Contraceptive Use 1994, ST/ESA/SER.A/143. Data cover the period 1986-1993.

4. This indicator is defined as the proportion of the population who can reach local health services within one hour by the usual means of transportation. See UNICEF, The State of the World's Children, 1995. Data cover the period 1985-1993.

5. The infant mortality rate is defined as the annual number of deaths to infants aged under one year divided by the annual number of live births, usually expressed per 1,000. See United Nations Population Division, World Population Prospects Database 1950-2050, 1994 Revision. Data are for 1992. The maternal mortality ratio is defined as the annual number of maternal deaths divided by the annual number of live births, usually expressed per 100,000. See UNICEF, The State of the World's Children 1995, which is based on data compiled by WHO. Data cover the period 1980-1992.

6. The gross female enrollment rate at the primary level is defined as the number of girls enrolled in primary-level grades divided by the sub-population of the age group appropriate to the primary level, usually expressed per 100. See United Nations Statistical Division, Women's Indicators and Statistics Database, Version 3 (CD-ROM), 1994, which is based on data compiled by UNESCO. Data are for 1990.

7. The adult female literacy rate is defined as the proportion of women aged 15 or more who are literate. (Three widely accepted definitions of "literate" are in use: UNESCO collates information but does not try to standardize it.)

8. Paragraph 13.15 of the ICPD Programme of Action estimates the global quantum of financial resources needed to successfully implement the Programme. Paragraph 14.11 gives equivalent estimates for the amount of external financial assistance required.

9. It is noted that this indicator, proportion of population with access to basic health services, suffers from reporting biases that tend to over-estimate true access, partially because distance from a service point alone does not measure what resources and services are actually provided at the service point. The threshold of 60 per cent is viewed as giving a realistic picture of the average levels of access that currently obtain and those that can reasonably be aimed for in the next decade. It should be noted that setting a higher threshold, e.g., of 65 per cent, would not alter the basic distribution.

10. The distribution of countries by number of thresholds met for 2005 for each group of countries is presented below.

	Number of thresholds met								
	0	1	2	3	4	5	6	7	Total
Group A	24	17	7	6	2*	4*	0	0	60
Group B	0	2	3	3	4	18	9	0	39
Group C	0	0	0	0	0	0	0	12	12

* Least developed countries

11. There are currently 48 least developed countries. All 48 will be placed in Group A, taking into account recommendations of the ICPD Programme of Action (paragraph 14.14). Of the 48 least developed countries, 42 have met three or fewer of the seven indicators.

12. The same statistical series for GNP per capita will be used as the one being used by UNDP, namely the GNP per capita for the year 1994.

13. Based on the discussions of the Executive Board in January 1996, at both formal and informal sessions, the percentages given for Groups A, B and C will be treated with flexibility in order to take into account the realities and practical possibilities involved in formulating and implementing UNFPA country programmes. These percentages, therefore, will be treated as a range within which allocations will be made in any given year.

14. In view of the foregoing discussion and based on the latest data on the selected indicators, the revised approach for allocation of country-programme resources was applied to the UNDP list of 174

IPF (indicative planning figures) countries plus South Africa. Of these, 27 are countries with economies in transition and 21 are net contributor countries. Of the remaining 127 countries in the database, 16 are countries with populations under 150,000 for which most data, save GNP per capita, are unavailable. The revised approach has therefore been applied to the remaining 111 developing countries with populations of 150,000 inhabitants or more. It is proposed that, for the group of small-population countries and the group of net contributor countries, the same order of resource allocation be maintained under the revised approach as has been allocated in the recent past, that is, around 0.5 per cent of country-programme resources.